

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

RECEIVED

Pat McConnaghy
373 Sandy Creek
Salmon ID 83467

Department of Water Resources
Eastern Region

2. Article Number

(Transfer from service label)

7008 3230 0001 8040 7096

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Pat McConnaghy*☐ Agent☒ Addressee

B. Received by (Printed Name)

373 Sandy CR

C. Date of Delivery

11-2-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

RECEIVED

Jerry R. Rigby
PO Box 250
Rexburg ID 83440

Department of Water Resources
Eastern Region

2. Article Number

(Transfer from service label)

7008 3230 0001 8040 7102

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jerry R. Rigby*☐ Agent☒ Addressee

B. Received by (Printed Name)

J. R. Rigby

C. Date of Delivery

10-26-10

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☒ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

RECEIVED

Randy R Olson
PO Box 38
Salmon ID 83467

Department of Water Resources
Eastern Region

2. Article Number

(Transfer from service label)

7008 3230 0001 8040 7119

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Cindy J. Olson*☐ Agent☒ Addressee

B. Received by (Printed Name)

Cindy J. Olson

C. Date of Delivery

10-25-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <i>Julie Hanson</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Julie Hanson C. Date of Delivery 10/25/10 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	
1. Article Addressed to: RECEIVED OCT 26 2010 Department of Water Resources Eastern Region Clayne Hanson 3543 E 630 N Menan ID 83434		3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		7008 3230 0001 8040 7089	
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		102595-02-M-1540	

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■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <i>Gita Grieve</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) GITA GRIEVE C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
1. Article Addressed to: RECEIVED NOV 02 2010 Department of Water Resources Eastern Region David A. Lowry 366 Sandy Creek Rd Salmon ID 83467		3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		7008 3230 0001 8040 7126	
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■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <i>Rancho Santa Fe</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Rancho Santa Fe C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
1. Article Addressed to: RECEIVED OCT 29 2010 Department of Water Resources Eastern Region Jessica K and Terry A McNellis PO Box 834 Rancho Santa Fe CA 92067		3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		7008 3230 0001 8040 7072	
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